

General Assembly

Raised Bill No. 6610

January Session, 2011

LCO No. 4668

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Referred to Committee on Public Health

Introduced by: (PH)

AN ACT CONCERNING VACCINES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 19a-7f of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2011*):
- 3 (a) The Commissioner of Public Health shall determine the standard
- 4 of care for immunization for the children of this state. The standard of
- 5 care for immunization shall be based on the recommended schedules
- 6 for active immunization for normal infants and children published by
- 7 the National Centers for Disease Control and Prevention Advisory
- 8 Committee [, as determined by the Commissioner of Public Health] on
- 9 Immunization Practices, the American Academy of Pediatrics and the
- 10 American Academy of Family Physicians. The commissioner shall
- 11 establish, within available appropriations, an immunization program
- 12 which shall: (1) Provide vaccine at no cost to health care providers in
- 13 Connecticut to administer to children so that cost of vaccine will not be
- 14 a barrier to age-appropriate vaccination in this state; (2) with the
- 15 assistance of hospital maternity programs, provide all parents in this
- 16 state with the recommended immunization schedule for normal

17 infants and children, a booklet to record immunizations at the time of 18 the infant's discharge from the hospital nursery and a list of sites 19 where immunization may be provided; (3) inform in a timely manner 20 all health care providers of changes in the recommended 21 immunization schedule; (4) assist hospitals, local health providers and 22 local health departments to develop and implement record-keeping 23 and outreach programs to identify and immunize those children who 24 have fallen behind the recommended immunization schedule or who 25 lack access to regular preventative health care and have the authority 26 to gather such data as may be needed to evaluate such efforts; (5) assist 27 in the development of a program to assess the vaccination status of 28 children who are clients of state and federal programs serving the 29 health and welfare of children and make provision for vaccination of 30 those who are behind the recommended immunization schedule; (6) 31 access available state and federal funds including, but not limited to, 32 any funds available through the federal Childhood Immunization 33 Reauthorization or any funds available through the Medicaid 34 program; (7) solicit, receive and expend funds from any public or 35 private source; and (8) develop and make available to parents and 36 health care providers public health educational materials about the 37 benefits of timely immunization.

38 (b) (1) A health care provider who administers vaccines to children 39 under the immunization program established pursuant to subsection 40 (a) of this section may select any vaccine licensed by the federal Food 41 and Drug Administration, including any combination vaccine and 42 dosage form, that is (A) recommended by the National Centers for 43 Disease Control and Prevention Advisory Committee 44 Immunization Practices, and (B) made available to the Department of 45 Public Health by the National Centers for Disease Control and 46 Prevention.

(2) The Department of Public Health shall provide a vaccine selected by a health care provider pursuant to subdivision (1) of this subsection only if the cost to the department of providing the vaccine does not

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- 50 exceed one hundred fifteen per cent of the lowest-priced equivalent
- 51 <u>vaccine</u>. For purposes of this subsection, "equivalent vaccine" means
- 52 two or more vaccines that (A) protect a vaccine recipient against the
- 53 same infection or infections, (B) have similar safety and efficacy
- 54 profiles, and (C) are recommended for comparable populations by the
- 55 <u>National Centers for Disease Control and Prevention.</u>
- 56 (3) The provisions of this subsection shall not apply in the event of a
- 57 public health emergency, as defined in section 19a-131, or an attack,
- 58 major disaster, emergency or disaster emergency, as those terms are
- 59 defined in section 28-1.
- Sec. 2. Section 19a-7j of the general statutes is repealed and the
- 61 following is substituted in lieu thereof (*Effective October 1, 2011*):
- 62 (a) Not later than September 1, 2003, and annually thereafter, the
- 63 Secretary of the Office of Policy and Management, in consultation with
- 64 the Commissioner of Public Health, shall (1) determine the amount
- appropriated for the following purposes: (A) To purchase, store and
- distribute vaccines for routine immunizations included in the schedule
- 67 for active immunization required by section 19a-7f, as amended by this
- 68 <u>act, including any vaccines selected by health care providers pursuant</u>
- 69 to subsection (b) of section 19a-7f, as amended by this act; (B) to
- 70 purchase, store and distribute (i) vaccines to prevent hepatitis A and B
- 71 in persons of all ages, as recommended by the schedule for
- 72 immunizations published by the National Advisory Committee for 73 Immunization Practices, (ii) antibiotics necessary for the treatment of
- tuberculosis and biologics and antibiotics necessary for the detection
- and treatment of tuberculosis infections, and (iii) antibiotics to support
- 76 treatment of patients in communicable disease control clinics, as
- 77 defined in section 19a-216a; and (C) to provide services needed to
- 78 collect up-to-date information on childhood immunizations for all
- 79 children enrolled in Medicaid who reach two years of age during the
- 80 year preceding the current fiscal year, to incorporate such information
- 81 into the childhood immunization registry, as defined in section 19a-7h,

and (2) inform the Insurance Commissioner of such amount.

- (b) Each domestic insurer or health care center doing life insurance or health insurance business in this state shall annually pay to the Insurance Commissioner, for deposit in the General Fund, a health and welfare fee assessed by the Insurance Commissioner pursuant to this section. [Not later than October 1, 2003, the Insurance Commissioner shall determine the fee to be assessed against each such domestic insurer or health care center for the fiscal year ending June 30, 2004.] Not later than October 1, 2003, and annually thereafter, the Insurance Commissioner shall determine the fee to be assessed against each such domestic insurer or health care center for the next fiscal year. Such fee shall be a percentage of the total amount appropriated, as identified in subsection (a) of this section, and shall be calculated on the basis of life insurance premiums and health insurance premiums and subscriber charges in the same manner as calculations under section 38a-48. Not later than November 1, 2003, and annually thereafter, the Insurance Commissioner shall submit a statement to each such insurer and health care center that includes the proposed fee for the insurer or health care center calculated in accordance with this section. As used in this section, "health insurance" means health insurance, as defined in subdivisions (1) to (13), inclusive, of section 38a-469.
- (c) Any domestic insurer or health care center aggrieved by an assessment levied under this section may appeal therefrom in the same manner as provided for appeals under section 38a-52.
- [(d) For the fiscal year ending June 30, 2004, the aggregate assessment under this section shall not exceed seven million one hundred thousand dollars. For the fiscal year ending June 30, 2005, the aggregate assessment under this section shall not exceed seven million one hundred thousand dollars.]

This act shall take effect as follows and shall amend the following sections:

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Section 1	October 1, 2011	19a-7f
Sec. 2	October 1, 2011	19a-7j

Statement of Purpose:

To allow health care providers who administer vaccines to children to choose which vaccine product to administer, provided the vaccine is recommended and made available to the state by the National Centers for Disease Control and Prevention, and is not more than one hundred fifteen per cent more expensive than an equivalent vaccine.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]